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69713 7590 March 1, 2010

Occhiuti Roblicek & Tsao LLF 10 Fawcett Street

Cambridge, MA 02138

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(Depositor's name) (Signature) (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/843,536	April 25, 2001	Todd A. Newville	30032-006001	7416
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TITLE OF INVENTION: INFORMATION PORTAL

APPLN TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$1810	June 1, 2010
EXAMINER		ART UNIT	CLASS-SUBCLASS		
Sharad K. Rampuria		2617	455-420000		

Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or	1. Occhiuti Rohlicek & Tsao LLP	
[] Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.	agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent	2	
[] "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47, Rev 03-02 or more recent) attached. Use of a Customer Number is required.	attorneys or agents. If no name is listed, no name will be printed.	3	

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PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. Inclusion of assignce data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filling an assignment

(A) NAME OF ASSIGNEE (B) RESIDENCE (CITY and STATE OR COUNTRY)

Gannett Satellite Information Network Inc.

McLean, Virginia

Please check the appropriate assignee category or categories (will not be printed on the patent) | 1 | individual | [X] corporation or other private group entity | 1 | government 4b Payment of Fee(s)

4a. The following fee(s) are enclosed

Typed or Printed Name Faustino A Lichauco

- [X] Issue Fee
- [X] Publication Fee (No small entity discount permitted) Advance Order - # of Copies
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- X] The Director is hereby authorized to charge the required fec(s), or credit any overpayment, to Deposit Account Number 50-4189 (enclose an extra copy of this form).
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[] a Applicant claims SMALL ENTITY status. See 37 CFR 1 2.7 []b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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(Authorized Sugnature)

41,942 Registration No.

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